

SUMMARY AND IMPLEMENTATION PLANS 2002 CHAPTERED LEGISLATION

RESIDENTIAL CARE FACILITIES FOR THE ELDERLY

<u>BILL NUMBER (AUTHOR)</u>	<u>SUBJECT</u>	<u>PAGE</u>
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ACTION REQUIRED

AB 1946 (Corbett)	Written Materials: Use of 12-Point Font	1
AB 1961 (Canciamilla)	Hospice Care Services	2
SB 1898 (Soto)	Pre-Admission and Other Fees	3-4

INFORMATION ONLY – NO ACTION REQUIRED

AB 1989 (Liu)	Notice to Families of Change in Resident's Health Status	5
AB 2659 (Runner)	Certification of Fingerprint Rollers	5
SB 900 (Ortiz)	Department of Justice Criminal History Dissemination Criteria	6

Unless otherwise noted, all new legislation becomes effective on January 1, 2003.

When conducting visits, LPAs should ensure that providers are aware of any new requirements.

ACTION REQUIRED

AB 1946 (CORBETT), CHAPTER 550, STATUTES OF 2002

Affects: Residential Care Facilities for the Elderly (RCFEs)

Subject: Written Materials: Use of 12-Point Font

Summary: This legislation adds Health and Safety Code Section 12322.1 . For RCFE's, the following written materials provided to residents by or on behalf of the RCFE must be printed in at least a 12-point font that is clear and legible:

- Instructions and forms for advance health care directives (even though these materials are not produced by RCFEs).
- Information produced by an RCFE regarding the rights and responsibilities of residents while receiving care at the RCFE, including forms and instructions.
- Information produced by an RCFE regarding grievances and appeals, including forms and instructions.
- Correspondence written, printed or produced by an RCFE. [This does not include correspondence pertinent to an RCFE but written, printed or produced by another entity (for example, a national elder care organization).]

RCFEs may use existing supplies of the above documents until they are gone, or until January 2, 2006, whichever comes first. After that, RCFEs must comply with the new requirement.

Under the law, an RCFE's policies and procedures do not have to meet the requirement of being printed in at least a 12-point font.

Implementation:

This law imposes requirement of RCFEs, but it does not impose any requirements on the Community Care Licensing Division. Therefore, the following applies:

- Licensing staff should advise licensees of the law during the next site visit. However, licensing staff need not specifically monitor facilities for compliance with this law.
- As resources permit, the Department will voluntarily revise existing RCFE licensing forms to be in at least a 12-point font.

ACTION REQUIRED

AB 1961 (CANCIAMILLA) CHAPTER 109, STATUTES OF 2002

Affects: Residential Care Facilities for the Elderly (RCFE)

Subject: Hospice Care Services

Summary:

This legislation amends the Health and Safety Code to permit individuals already receiving hospice care services to be admitted to a Residential Care Facility for the Elderly (RCFE).

Effective January 1, 2003, an individual utilizing hospice care services may become a resident of the RCFE, provided the facility has obtained a hospice care waiver.

Implementation:

This legislation is self-implementation and regulations will be updated to reflect the deletion of the residency requirement. In the interim, licensees should not be cited for admitting an individual after December 31, 2002 who was/is receiving hospice care services provided the licensee has obtained a hospice care waiver.

ACTION REQUIRED

SB 1898 (SOTO), CHAPTER 557, STATUTES OF 2002

Affects: Residential Care Facilities for the Elderly

Subject: Pre-Admission and Other Fees

Summary: This legislation adds Sections 1569.651 and 1569.655 to the Health and Safety Code. The new provisions are outlined below:

- Licensee must provide a 60-day advance written notice to residents for any fee or rate structure increase, except those due to a change in level of care.
- Licensees may only charge a single pre-admission fee to private pay residents. Licensees must provide applicants or their representatives with a written general statement describing the costs associated with this fee and stating whether or not the fee is refundable, and the conditions for a refund.
- Licensees must clearly specify in the admission agreement any fees charged by the RCFE.
- Licensees may not accept or require any funds that constitute a deposit against possible damages by the resident.
- Licensees are prohibited from charging nonrecurring lump sum assessments. However, the legislation does allow amortizing lump sum assessments over a twelve-month period. Any and all fees must be clearly delineated in the admission agreement.
- Licensees may not require any form of pre-admission fee or deposit from an SSI/SSP recipient.

Implementation:

Until regulations are issued, licensing staff will use the statutory provision in Health and Safety Code Sections 1569.651 and 1569.655 as the authority for citing and implementing. Effective January 1, 2003, licensing staff will use the following procedures and citing authority when reviewing facility records.

Admission Agreements – H&S Code 1569.651

Review admission agreements dated on or after January 1, 2003 for the following:

- No fee is charged as a damage deposit.
- All fees charged are clearly specified in the admission agreement, whether the fees are refundable, and the conditions for the refund.
- No pre-admission fee or deposit of any kind is charged to SSI/SSP recipients.
- Notice of rate increases are at least 60 days in advance.

Residents' Records – H&S Code 1659.655

These provisions are applicable to all residents regardless of date of admission.

Review resident's records for the following:

- Documentation of 60 days' prior notice of a rate increase and a general description of the additional costs. Rate increases due to a change in the resident's level of care are not subject to a 60 day notice. (This does not apply to SSI/SSP residents who receive yearly COLA increases.)
- No non-recurring lump sum increase. Licensees cannot charge residents a one-time fee for increases in insurance premiums, energy costs, etc. Such costs to the resident must be amortized over a 12-month period of time.

INFORMATION ONLY - NO ACTION REQUIRED

AB 1989 (LIU), CHAPTER 272, STATUTES OF 2002

Affects: Residential Care Facilities for the Elderly

Subject: Notice to Families of Change in Resident's Health Status

Summary: This legislation adds Section 1795 to the Health and Safety Code to require the licensee of a residential care facility for the elderly to make reasonable efforts to contact the resident's contact person (responsible person or conservator) within 24 hours after a significant change in the resident's health or mental status.

Reappraisals, Section 87587(b) of the Residential Care Facilities for the Elderly regulations, currently require licensees to immediately bring to the attention of the resident's physician and family/responsible person, significant changes.

This legislation reinforces regulatory requirements. No additional implementation is necessary.

AB 2659 (RUNNER), CHAPTER 623, STATUTES OF 2002

Affects: Child Care Facilities; also affects Community Care Facilities, Residential Care Facilities for the Chronically Ill and Residential Care Facilities for the Elderly.

Subject: Certification of Fingerprint Rollers

Summary: This legislation adds Section 11102.1 to the Penal Code. This section requires the Department of Justice (DOJ) to establish, implement and maintain a certification program for individuals who roll applicant fingerprint impressions for licensure, certification or employment purposes by January 2004. This section authorizes DOJ to charge a fee sufficient to cover costs of the certification program and requires persons who roll fingerprint impressions to submit fingerprints to the DOJ for a criminal background clearance.

This section also requires DOJ to work with applicant regulatory entities to improve and make more efficient the criminal offender record information request process.

INFORMATION ONLY – NO ACTION REQUIRED

SB 900 (ORTIZ), Chapter 627, Statutes of 2002

Affects: Child Facilities; also affects Community Care Facilities, Residential Care Facilities for the Chronically Ill and Residential Care Facilities for the Elderly

Subject: Department of Justice Criminal History Dissemination Criteria

Summary: This legislation amends the Penal Code to consolidate, from nine categories to six, the dissemination criteria that the Department of Justice uses to provide criminal history summary information to requesting departments.